

35.C14953



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Receipt

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | | |
|-----------------------------|---|----------------------------|
| In re Application of: |) | |
| JUNICHI KIMIZUKA ET AL. |) | Examiner: Not Yet Assigned |
| Application No.: 09/697,499 |) | Group Art Unit: 2622 |
| Filed: October 27, 2000 |) | |
| For: IMAGE FORMATION |) | |
| APPARATUS |) | February 13, 2001 |

Commissioner for Patents
Washington, D.C. 20231

REQUEST FOR CORRECTED FILING RECEIPT

Sir:

Applicants' attorneys have received an official Filing Receipt in the above-identified application in which the first inventor's address has been omitted. The first inventor's address should read as follows:

--KANAGAWA-KEN, JAPAN--.

Also, the second inventor has been omitted. The second inventor should read as follows:

--ATSUKO ADACHI, SHIZUOKA-KEN, JAPAN--.

Finally, the Priority Data has been omitted. The Priority Data should read as follows:

--JAPAN 11-314123 11/04/1999--.

Issuance of a corrected Filing Receipt, corrected as shown above, is accordingly respectfully requested.

Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicants

Registration No. 26718

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3801
Facsimile: (212) 218-2200

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| APPLICATION NUMBER | FILING DATE | GRP ART UNIT | FIL FEE REC'D | ATTY. DOCKET NO | DRAWINGS | TOT CLAIMS | IND CLAIMS |
|--------------------|-------------|--------------|---------------|-----------------|----------|------------|------------|
| 09/697,499 | 10/27/2000 | 2622 | 1934 | 35.C14958 | 8 | 48 | 12 |

05514

 FITZPATRICK CELLA HARPER
 30 ROCKEFELLER PLAZA
 NEW YORK, NY 10112


FILING RECEIPT



OC000000005650364

Date Mailed: 01/03/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Junichi Kimizuka, Residence, NOT-PROVIDED;

Continuing Data as Claimed by Applicant

Foreign Applications

If Required, Foreign Filing License Granted 01/03/2001

Title

Image formation apparatus

Preliminary Class

358

Data entry by : DILLON, LAWANDA

Team : OIPE

Date: 01/03/2001



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Title 37, Code of Federal Regulations, 5.11 & 5.15**

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Bib Data Sheet

CONFIRMATION NO. 3514

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|---|---|----------------------------------|---|---|---------------------------------|
| SERIAL NUMBER 09/697,499 ✓ | FILING DATE 10/27/2000 RULE | CLASS 358 | GROUP ART UNIT 2622 | ATTORNEY DOCKET NO. 35.C14958 | |
| APPLICANTS Junichi Kimizuka, Kanagawa-ken, JAPAN; Atsuko Adachi, Shizuoka-ken, JAPAN; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** JAPAN 11-314123 11/04/1999 IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/03/2001 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials | | STATE OR COUNTRY JAPAN | SHEETS DRAWING 8 | TOTAL CLAIMS 48 | INDEPENDENT CLAIMS 12 |
| ADDRESS 05514 | | | | | |
| TITLE Image formation apparatus | | | | | |
| FILING FEE RECEIVED 2064 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |